

ADDRESS ALL INVOICES TO:

Victor Valley Union High School District 16350 Mojave Drive Victorville, CA 92395 Phone: (760) 955-3201

(309) 665-0171

Fax: (760) 245-3128

Vendor:	062795-02	Attn:
Phone:	(800) 288-7750 x	Fax:

Attn:

Email:

GAGGLE.NET INC. P.O. BOX 1352

BLOOMINGTON, IL 61702

Ship To:

PURCHASE ORDER NUMBER 180788

THIS NUMBER MUST APPEAR ON ALL NVOICES, PACKING SLIPS, PACKAGES & CORRESPONDENCE.

Date:

09/12/2017

Description:

Student Safety Software

COMPUTER INFORMATION SYSTEMS

16350 MOJAVE DRIVE

VICTORVILLE, CA 92392-0000 Phone: () - Fax: () -



FOB SHIP VIA BUYER **PAYMENT TERMS** DESTINATION **UPS** REQ.# REQUESTOR LOCATION **BLDG/DEPT** ROOM 000914 Dr. Audrey Hovannesia COMPUTER INFORMATION S | COMPUTER INFORMA

	#	Qty	Unit						
-	π	Qty	Offic	Description	Unit Price	P/C	Total		
	1	10000.00	EACH	Gaggle Safety Management for Google Student (See Invoice 41673)	\$3.7500	\$0.00	\$37,50	DO.	00
	2	1.00	EACH	Gaggle One-Day On-site User Training (See quote 41673)	\$2,495.0000	\$0.00	44-171		
						e e			
L	_1			01-0000-0-0000-7700-5840-811-0000 \$39,995.00				Ш	

ACCOUNTING

Item	Qty	Desc.	Rec.Date	Ву	Item	Qty	Desc.	Rec.Date	Ву

SUBTOTAL:	\$39,995.0	0
SALES TAX:	\$0.0	0
SHIPPING:	\$0.0	0
TOTAL:	\$39,995	O

Batch Item #

Date Amt

Partial

Complete

Authorized Signature

Page 1 of 1

ACCOUNTING COPY



VICTOR VALLEY UNION HIGH SCHOOL DISTRICT REQUEST FOR CONTRACT/AGREEMENT (MOU) APPROVAL

	lew 🗸	Renew	Categorical/LCAP Funds: Yes No
Con	ntract No:	017/18-62	(Issued by VVUHSD Business Services)
Form must be typed			Req No.: 914
School/Department:	TechEd De	partment	Principal/Supervisor: Dr. Audrey Hovannesian
Vendor Name: Gaggl			AUG 28 2017
Business License #:	4-36024	122 Con	tact Person: Sonya Hooks
Billing Address: P.O.	Box 1352	Bloomington, IL 617	702
Phone: 800-288-7750)	Fax: 309-665-0171	Email: sonya@gaggle.net
		Services to	be provided:
Monitoring of student	Google er	Wironment to ensure	cafe use
	· oogic ci	TVITOITHEIL TO CHSULE	sale use.
Total Cost: \$114,995.0)0 I	Budget Acct. Code:	01-0000-0-0000-7700-5840-811-0000
Contract Start: 09/1/2			End Date: 08/31/2020
Justi	fication fo	r hiring outside con	sultant/company to provide services:
Service is provided by	/ proprieto	ry coftware cala. W	battand company to provide services:
service internally.	proprieta	ly software only. We	e do not have the resources or tools to provide this
	How	is this aligned to th	e District's Strategic Plan?
Specific Result 4: Ensinclude security and f	sure compr acilities.	ehensive safety stand	lards for constantly evolving needs district-wide, to
		Evaluation Monito	ring and Measurable:
Creation of atudant			
subsequent years to de	termine ou	nment. Number of introduced in the interest of interest of interest of the int	ncidences reported in year 1 as baseline compared to mmunication and user feedback.
Initiator: Dr. Audrey	Hovanne	sian	Asst. Supt. Business: Lauri Brown
Signature:	a_		Signature: Alle BRay
Date: 8/21/2017			0/20/10
Date.	CCOU	VIING-	Date: 5 0 8 1
BUSINESS SERVIC	ES OFFIC	Eni7 NOTE	S:
Insurance / Liab	SEP 28	2017	, ,
W-9	PA	ID Board A	Approval Date: 8/17/17
Finger print clea	rance		



Gaggle.Net, Inc.

P.O. Box 1352, Bloomington, IL 61702-1352

800-288-7750 Fax: 309-665-0171

FEIN:04-3602422

Gaggle Quote# 41673

Prepared for

VICTOR VALLEY UNION HIGH - VICTORVILLE CA

Service D	Details		
Service Description	Quantity	Unit Cost	Total Cos
Gaggle Safety Management for Google - Students	10,000	\$3.75	\$37,500
Training	1	\$2,495.00	\$2,49
TOTAL*			\$39,99
Does not include any applicable sales tax.			
Pricing Term: 12 Month			
Additional Information: Pricing shown is annual fee.			



1 th on rason

Department of the Treasury Internal Revenue Service

Request for Taxpayer **Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

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	Name (as shown on your income tax return) Gaggle.Net, Inc.									
				13						
d	Business name/disregarded entity name, if different from above							NORTH COLUMN	···×	
398	Gaggle									
Print or type Specific Instructions on page	Check appropriate box for federal tax classification:		······································	***************************************		***************************************	T	*************		
ō	☐ Individual/sole proprietor ☐ C Corporation ☑ S Corporation	Partnership Trust	Contata							
pe		L . addedap L mast	ostato							
學學	Limited liability company. Enter the tax classification (C=C corporation,	C. C. normanallan D. market L. L.						Exem	pt paye	ee
25	Corporation,	o=3 corporation, P=partnership)				*******				7076
Print or type	[] Oher to the U. 15									
D 5	Other (see instructions) >									
S.	Address (number, street, and apt. or sulte no.)	Rec	uester's	s name a	nd ac	idress (or	otionall			
Sp	2205 E. Empire, Sulte B									
See	City, state, and ZIP code									
S	Bloomington, IL 61704	i i					Atra			
	List account number(s) here (optional)						AU6	27	777	17
								202 02		
Par	Taxpayer Identification Number (TIN)					\$ 245				
Enter	your TIN in the appropriate box. The TIN provided must match the na	me given on the "Name" line	So	icial sec	urity	number				
to avo	IQ D&CKUD WIThholding. For individuals, this is your social security our	shor/SSAN However for a		T	7	T	т г		T	닉
reside	III allen, sole proprietor, or disregarded entity, see the Part I instruction	ne on nago 2 For other	1		-		_			
TIN or	s, it is your employer identification number (EIN). If you do not have a page 3.	number, see How to get a	L		_		J L			
		V 200	Г							
numbe	If the account is in more than one name, see the chart on page 4 for ger to enter.	guidelines on whose	LEN	ployer	denti	fication	numbe	r		
			0	4 -	. 3	6 0	2	4 2	2	
Pari	II Certification				<u></u>			1		
	penalties of perjury, I certify that:			***************************************						
	number shown on this form is my correct taxpayer identification num	shor for I am welling for		1 x						
0 100		mer for i stu waiting for a un	mber to	o be iss	ued	to me), a	and			
Z. Tall	n not subject to backup withholding because: (a) I am exempt from by	ackup withholding, or (b) I ha	ve not	been n	otifie	d by the	Intern	al Re	venue	
no	vice (IRS) that I am subject to backup withholding as a result of a failuonger subject to backup withholding, and	ire to report all interest or div	vidends	s, or (c)	the l	RS has i	notified	d me	that I a	am
	a U.S. citizen or other U.S. person (defined below).									
Certifi	cation instructions. You must cross out item 2 above if you have been you have failed to report all interest and dividends an accurate	en notified by the IRS that yo	ou are c	currently	sub	ject to t	ackup	with	holdin	g
genera	t pald, acquisition or abandonment of secured property, cancellation lly, payments other than interest and dividends, you are not required	to sign the cartification, but	individu	Jal retire	emer	it arrang	ement	(IRA)	, and	
instruc	tions on page 4.	to sight the contineation, but	you mu	ior brox	ide y	our corr	ect III	4. 566	o tne	
Sign	Signature of Co. 1									
Here	U.S. person > CARNIE EXT	Date►	4-	18-	17					
	eral Instructions	·								
		Note, if a requester gives	you a	form of	her ti	han Forr	n W-9	to re	quest	
Section	references are to the Internal Revenue Code unless otherwise	your TIN, you must use the to this Form W-9.	e requ	eater a	iorm	IT IT IS SU	ıbstan	tially:	similai	r
noted.		Definition of a U.S. pers	an For	fodoro	tow	nurnoac				
Purp	ose of Form	considered a U.S. person	if you	are:	ldX	purpose	s, you	are		
A perso	on who is required to file an information return with the IRS must	 An Individual who is a U 	.S. citiz	zen or l	J.S. r	esident	alien.			
obtain	your correct taxpayer identification number (TIN) to report, for	* A partnership, corporati	on, cor	nnany	07 95	enciatio	n cron	ted o	r	
qmaxe	e, income paid to you, real estate transactions, mortgage interest d, acquisition or abandonment of secured property, cancellation	organized in the United S	tates or	r under	the l	aws of t	he Uni	ted S	tates,	
of debt	, or contributions you made to an IRA.	 An estate (other than a f 								

Use Form W-9 only if you are a U.S. person (including a resident

alien), to provide your correct TIN to the person requesting it (the

requester) and, when applicable, to: 1. Certify that the TIN you are giving is correct (or you are waiting for a

- number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt S. Claim exemption from backup withholding it you are a c.s. exempt payee, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on fereign partners share of effectively connected income
- A domestic trust (as defined in Regulations section 301,7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

SEP 28 2017

Cat. No. 10231X

Form W-9 (Rev. 12-2011)



Gaggle.Net, Inc. P.O. Box 1352

Bloomington, IL 61702 Tel: (800) 288-7750 Fax: (309) 665-0171

Gaggle Invoice

BAN	Date	Invoice #
14344-000	8/18/2017	34612

Invoice To

Victor Valley Union High 16350 Mojave Dr Victorville, CA 92395-3655 US Ordered By

Victor Valley Union High 16350 Mojave Dr Victorville, CA 92395-3655 US

Attn: Audrey Hovannesian

Doc Number	Contract	P.O. No.	Rep		Group #	Due Date
11898			SMH	1		9/17/2017
Item	Description	on	Quantity		Rate	Amount
1808-S	Gaggle Safety Manager - Student	ment for Google 1	10,000		3.75	37,500.00
Γraining	Training Onsite	1	I		2,495.00	2,495.00
ServStart ServEnd	9/1/2017 8/31/2018		24			
					RECEIVE	D
				***************************************	SEP 15 20	017
			o de la companya de l	FIS	CAL SERV	'ICES
		K to PO P.O# 1807	ay 88		AUG	2.8 2017
Thank you for yo	ur business.	9 15/11	Tota	ıl		\$39,995.00

www.gaggle.net Safe Tools for 21st Century Learning FEIN - 04-3602422

ACCOUNTING

SEP 28 2017

PAID



Contract for Services

Contract Number: 2017-41673

This contract by and between Gaggle.Net, Inc. (Gaggle), mailing address PO Box 1352, Bloomington, IL 61704 and Victor Valley Union High - Victorville CA (Customer) for good and valuable consideration as set forth hereby agree and contract as follows:

1. Services Provided by Gaggle

Gaggle shall provide the Customer with services as outlined in quote number 41673 included as an appendix and incorporated herein for the duration of the contract term at a price guaranteed herein unless the service changes. In the event of change of services, the term of this agreement remains the same however pricing may vary. Gaggle will notify the Customer of any resulting changes in pricing prior to increase and service change.

2. Contract Term

Service Commencement Date: August 1, 2017

Service Expiration Date: July 31, 2020

3. Services and Payment

Gaggle shall provide services as outlined by the Quote (appendix). Full annual payment is due and payable within 30 days of the receipt of invoice. Customer is responsible for any and all taxes associated with services. If Customer wishes to begin installation before the contract term start date, Customer may be required to pay a pro-rated cost for early started services. Gaggle will notify the Customer of any charges prior to the early commencement of services.

This agreement provides for fixed pricing over the term of contract. The parties recognize that that the number of accounts may vary over the term of the contract. No amendment to pricing shall take place unless the number of active accounts varies by more than 20% from the original contract numbers.

4. Terms and Termination

This agreement shall become effective on the date indicated as the Service Commencement Date in the Contract and shall remain in ful force and effect for the term of the contract as identified in Section 2.

Termination for Cause Either party may terminate this agreement in the event of material breach of a provision of this agreement and the other party fails to cure said breach within 30 days of written notice of said breach. In the event of early termination of the contract by Customer without cause liquidated damages equal to the value of one year's service shall be assessed.

5. Indemnity

The parties shall defend, indemnify, and hold each other harmless from any and all claims arising out their failure to perform their obligations as outline under this Contract and incorporated term.

6. Ownership

All ownership of code and product remains with Gaggle, with the exception of any Customer data and content that was uploaded or created by Customer as a result of Customer's use of Gaggle's services. Customer acknowledges that it is solely responsible for all content and information appearing on the site and Gaggle has no responsibility for the accuracy, completeness or legality of said information.



Contract for Services

Contract Number: 2017-41673

7. Limitation of Liability

In no event shall Gaggle be liable to Customer for any indirect, consequential, incidental, special or punitive damages or lost profits arising out of or related to this agreement or breach thereof, even if advised in advance of the possibility of same. Gaggle's liability to Customer for services, if any, shall not exceed the total amounts paid to Gaggle under the operation of this contract by Customer.

8. Incorporation by Reference

Gaggle's applicable Quote, Terms and Conditions, and Service Level Agreement are hereby acknowledged and incorporated into this contract by reference.

9. Amendment

This contract contemplates amendment by mutual agreement of the parties. Amendments to this contract shall be in writing and indicate the contract number and incorporate into this agreement.

10. General

Title

This agreement shall be governed by the laws of the state of Illinois. All amendment to said agreement shall be in writing and signed by both parties to be valid unless otherwise noted.

Johnie Et	9/27/17	Galli Barus	9/27/17
Authorized Representative for Gaggle	Date	Authorized Representative for Victor Valley Union High - Victorvill	Date e CA
Jennie EA		LAURI BROWN	
Print Name	1	Print Name DIRECTOR FISCAL	Carl
Director of Sales Op	perations	PIRECTOR PISCUL	



Gaggle.Net, Inc.

P.O. Box 1352, Bloomington, IL 61702-1352

800-288-7750 Fax: 309-665-0171

FEIN:04-3602422

Gaggle Quote# 41673

Prepared for

Victor Valley Union High - Victorville CA

Service I	Details	LANGER STEER PROPERTY AND A VALUE STEER	rema kulongrapasan
Service Description	Quantity	Unit Cost	Total Cost
Gaggle Safety Management for Google - Students	10,000	\$3.75	\$37,500
Training	1	\$2,495.00	\$2,495
TOTAL*		ľ	\$39,995
Does not include any applicable sales tax.	and a Defending special section in the second section of the section of the second section of the section of th		
ricing Term: 12 Month		AND CORE CONTROL	
Additional Information: Pricing shown is annual fee.			